

MAINTAINED RESERVED FOR BINDING
 WRITE PLAINLY WITH UNFADING INK--THIS IS A PERMANENT RECORD
 N. B.--In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH

State File No. 158
 Registered No. 247

1. PLACE OF BIRTH

County Gila State Arizona
 District or Township Copper Hill or Village _____
 City _____ No. _____ St. _____ Ward _____
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Maria Rubalcaba

If child is not yet named, make supplemental report, as directed.

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other - 5. No., in order of birth. 6. Legitimate? yes 7. Date of birth Sept. 25, 1925
 Month Day Year

8. FATHER

Full name Benzelado Rubalcaba

9. Residence (Usual place of abode) Copper Hill, Ariz.
 If non-resident, give place and state.

10. Color or race Mexican 11. Age at last birthday 48 (Years)

12. Birthplace (city or place) Mexico
 (State or country)

13. Occupation
 Nature of industry miner

14. MOTHER

Full maiden name Francisca Hernandez

15. Residence (Usual place of abode) Copper Hill, Ariz.
 If non-resident, give place and state.

16. Color or race Mexican 17. Age at last birthday 34 (Years)

18. Birthplace (city or place) Mexico
 (State or country)

19. Occupation
 Nature of industry Housewife

20. Number of children of this mother (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living seven (b) Born alive but now dead seven (c) Stillborn none 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 6:20 P.m. on the date above stated
 (Born alive or stillborn.)

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature T. S. Harper, M.D.

Given name added from a supplemental report.

Address Globe, Ariz.
 (Physician or midwife).

Month, day, year
491-925-689
 Registrar

Filed 9/30, 1925 W. W. Horst
 Registrar